Customized PTO/SB/21 (09-08)

Application # | 10/532,108

| TRANSMITTAL FORM | | | Confirmat | ion# | 9052 | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--------------------------|
| | | | Filing | Date | 04/21/2005 | | |
| (for all correspondence after initial filing) | | | First Inve | entor | KURI | | |
| | | | Art | Unit | 1616 | | |
| | | | Exan | niner | Chui, Mei Ping | | |
| Total number of pages in this submission = | | | Doc | ket# | P08616US00/BAS | | |
| | | | | | | | |
| ENCLOSURES (check all that apply) | | | | | | | |
| ☐ Fees calculated below ☐ Amendment/Reply ☐ including Attachment(s) ☑ After Final Amendment/Reply ☑ including Attachment(s) ☑ Extension of Time Petition | | | Reply to Missing Parts/Incomplete Application Certified Copy of Priority Document(s) Information Disclosure Statement Drawing(s) Terminal Disclaimer | | | | |
| FEES CALCULATION: For c | laime if requ | ired an | d/or other fo | 00.00 | shown | holow | |
| TES CALCULATION. TOTO | | | | | Φ | | |
| □ TOTAL CLAIMS □ INDEPENDENT CLAIMS | | | | | nt Extra | Rate | <u>\$</u> |
| | 13 | - 20 - 3 | | | 0 | X \$ 52 = X \$ 220 = | 0 |
| | 1 -3 0 X \$ 220 = Total Of Above Claims Fees | | | | | | 0 |
| TOTAL OF ABOVE CLAIMS FEES = 0 Reduction by ½ for small entity status of applicant | | | | | | | |
| SUBTOTAL = | | | | | | 0 | |
| ☐ Fee for extension of time (per attached Petition)☐ Other fee for | | | | | | | 130 |
| TOTAL OF ALL FEES = | | | | | | | \$130 |
| ☑ Payment of \$ 130.00 is ☐ CREDIT CARD PAY ☑ ELECTRONIC FUND ☑ The Director is authorized to Deposit Account No. 13 (1) if no payment or an in (2) if no petition for extender the petitions under to render this submiss | MENT FORM OS TRANSFER I to charge an 2-0555: sufficient pay sion of time is 37 CFR 1.13 | R - subn y fee, a ment is s enclos | nitted concur dditional fee o enclosed and ed but an EO | rrently or exter I a fee T is rec | herewith her | th. due in connecti connection here and in this event | ewith; or , applicant |
| Date: Navamber 10, 200 | .0 | | Docy | flein | Sp | Echem F 8,578 man | D/L |
| Date: November 10, 200 | ٥: _د | anod D | / Nama: D | Λο: | #72 Schill | 8,578 | |
| | | | / Name: B. 1 Registratio | | | | |

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